

FILED 24 FEB '16 14:41 USDC-ORP

Name, Address,  
E-mail, & Phone

UNITED STATES DISTRICT COURT  
DISTRICT OF OREGON

Asa Carl Swindell  
Michael Alan McVahle  
Plaintiff(s),

3:16 CV-0341 - SI  
Case No.:

v.  
State of Oregon  
Defendant(s).

MOTION FOR APPOINTMENT  
OF PRO BONO COUNSEL

I, Michael A. McVahle, move for the appointment of pro bono counsel.

To support this motion, I declare under penalty of perjury that (check one):

☒ I have been granted, or have applied for, permission to proceed *in forma pauperis*.

☒ I have attached an affidavit demonstrating my inability to pay the cost of an attorney.

I have made the following diligent efforts to obtain legal counsel but have been unsuccessful because of my poverty (describe below):

went to BOLI, HUD, Tenants Rights of OR, Portland Tenants union, Legal Aid, Called at least 20 lawyers out of phone book.

I need appointed counsel to assist me because (describe below):

My co-litigant has been adjudicated incompetent. I have seizures and the severe cognitive impairment that come with those, but also have R.C. S. and have less severe disabilities as well. I am not capable of representing Mr Swindell.

Michael A. McVahle  
Signature

Feb 23, 2016  
Date

Michael Alan McVahle  
Printed Name

**AFFIDAVIT IN SUPPORT OF  
MOTION FOR APPOINTMENT OF PRO BONO COUNSEL**

I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☐ Yes ☒ No

If you answered yes, where are you are incarcerated? \_\_\_\_\_

2. Are you currently employed? ☐ Yes ☒ No

If you are employed:

List your employer's name: \_\_\_\_\_

List your employer's address: \_\_\_\_\_

Amount of take-home pay: \$ \_\_\_\_\_ per \_\_\_\_\_ (hour, day, week, month)

If you are not employed:

Name your last employer: Democracy Resources

Last employer's address: \_\_\_\_\_

Date of last employment: April 2014

Amount of take-home pay: \$ 9 per hour (hour, day, week, month)

3. Is your spouse or significant-other employed? ☐ Yes ☐ No ☒ Not Applicable

Name of employer: \_\_\_\_\_

Employer's address: \_\_\_\_\_

Date of last employment: \_\_\_\_\_

Amount of take-home pay: \$ \_\_\_\_\_ per \_\_\_\_\_ (hour, day, week, month)

4. Have you received money from any of the following sources in the last 12 months?

• **Business, professions, or other self-employment:**

☐ Yes Amount Received: \$ \_\_\_\_\_ Amount expected in future: \$ \_\_\_\_\_

☒ No

• **Rent payments, interest, or dividends:**

☐ Yes Amount Received: \$ \_\_\_\_\_ Amount expected in future: \$ \_\_\_\_\_

☒ No

- **Pensions, annuities, or life insurance payments:**

☐ Yes Amount Received: \$ \_\_\_\_\_ Amount expected in future: \$ \_\_\_\_\_

☒ No

- **Disability or workers compensation payments:**

☐ Yes Amount Received: \$ \_\_\_\_\_ Amount expected in future: \$ \_\_\_\_\_

☒ No

- **Gifts or inheritances:**

☐ Yes Amount Received: \$ \_\_\_\_\_ Amount expected in future: \$ \_\_\_\_\_

☒ No

- **Any other sources:**

☐ Yes Amount Received: \$ \_\_\_\_\_ Amount expected in future: \$ \_\_\_\_\_

☒ No

5. **Do you have cash or savings accounts, including prison trust accounts?**

☐ Yes Total amount: \$ \_\_\_\_\_

☒ No

6. **Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles, or other valuable property?** ☐ Yes (describe below) ☒ No

Type of Asset	Brief Description	Estimated Value

7. **Do you have any other assets?** ☐ Yes (describe below) ☒ No

Type of Asset	Brief Description	Estimated Value

8. Do you have monthly expenses, including housing, transportation, utility, judgments, loan payments, or other regular expenses? ☐ Yes (describe below) ☒ No

Expense Description	Estimated Monthly Payment

9. List the persons (or, if under 18, initials only) who are dependent on you for support:

Name or Minor's Initials	Relationship (Spouse, child, parent, etc.)	Amount of Monthly Support Your Provide

10. Do you have any debts or financial obligations? ☐ Yes (describe below) ☒ No

Michael A McVahle  
Signature  
Michael Alan McVahle  
Printed Name

Feb 23<sup>rd</sup>, 2016  
Date